aap Implantate AG
aap Radius Set 2.5

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MAR 1 1 2013

Summary of Safety and Effectiveness

Sponsor:

aap Implantate AG

Lorenzweg 5

D-12099 Berlin Germany

Company Contact:

Dr. Christian Zietsch

Phone:+49-30-750-19 -193 Fax: +49-30-750-19 - 111

Date

December/13/ 2012

Trade Name:

aap Radius Set 2.5

Common Name:

Radius Set 2.5

Classification Name and

Reference:

21 CFR 888.3030 Single/multiple component metallic bone fixation appliances and accessories – Class II and

21 CFR 888.3040 Smooth or threaded metallic bone fixation fas-

tener - Class II

Device Product Code and

Panel Code:

Orthopedics/87/ HRS: Plate, Fixation, Bone Orthopedics/87/ HWC: Screw, Fixation, Bone

Predicate device:

Synthes Locking Distal Radius Plating System, Synthes (USA) with premarket notification no. K012114 (SEP 28, 2001).

Device Description:

Bone plates and screws are used for fixation of bone fragments, i.e., for treatment of bone fractures and other bone injuries.

Bone plates are fixed by the use of bone screws. Bone plates and bone screws are implants. If the plates are used in conjunction with locking screws, a so called internal fixator will be realized (internal fixation).

The aap Radius Set 2.5 consists of:

- Extra-art. Radius Plate WSP 2.5, (left and right version)
- Juxta-art. Radius Plate WSP 2.5, (left and right version)
- L-Plate WSP 2.5, (left and right version)
- Straight Plate WSP 2.5
- T-Plate WSP 2.5
- Cortical Screw WS 2.5, self-tapping (locking bone screw)
- Cortical Screw 2.5, self-tapping
- Set of Instruments, Radius Set 2.5

Material:

Plates are made of cp Titanium (ASTM F67 or ISO 5832-2). Screws are made of Ti6Al4V (ASTM F136 or ISO 5832-3)

Indications:

The aap Radius Set 2.5 is indicated for the fixation of intra- and extra-articular fractures and osteotomies of the distal radius.

Substantial Equivalence

The Substantial Equivalence of the new device and the predicate device is based on similar intended use, design, functionality, components and materials in use.

Documentation including mechanical testing to show the substantial equivalence and safety and effectiveness has been provided with this submission.

Performance Data (Non-Clinical and / or Clinical):

Non-clinical tests have been performed and show the effectiveness and safety of the device.

Summary of Non-clinical tests:

Type of test:

Fatigue implant tests with progressive loadings, representing worst case scenario with respect to clinical use.

Mechanical tests of Screws acc. to ASTM F543-07

Assessment of test results:

Substantial equivalence with respect to the mechanical performance of the aap system could be stated due to the test results gained. The subject device is safe and effective, and whose performance meets the requirements of its pre-defined acceptance criteria and intended uses.

The Screws fulfil the relevant requirements of ASTM F543-07 and pre-defined acceptance criteria and intended uses.

Documentation regarding the mechanical testing to show the substantial equivalence and safety and effectiveness has been provided with this submission.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

March 11, 2013

aap Implantate AG % Dr. Christian Zietsch Manager Regulatory Affairs Lorenzweg 5 Berlin Germany 12099

Re: K123875

Trade/Device Name: aap Radius Set 2.5 Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation appliances and

accessories

Regulatory Class: Class II Product Code: HRS, HWC Dated: December 13, 2012 Received: December 17, 2012

Dear Dr. Zietsch:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you; however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must

comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safetv/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,



Mark N. Melkerson Director Division of Orthopedic Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Indications for Use Statement

510(k) Number (if known): K123875

Device Name: aap Radius Set 2.5

Indications for Use:

The aap Radius Set 2.5 is indicated for the fixation of intra- and extra-articular fractures and osteotomies of the distal radius.

Prescription Use X (Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use _____(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE OF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

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Elizabeth Frank -S

Divison of Orthopedic Devices